

DO/EO BIBLIOGRAPHIC DATA ENTRY

SERIAL NUMBER: 08 / 732408  
IA NUMBER: PCT/ EP95 / 01357 RECEIPT DATE: 10 / 22 / 96  
FAMILY NAME: REINMULLER IA FILING DATE: 04 / 12 / 95  
GIVEN NAME: JOHANNES DELAY WAIVED (Y/N): Y  
PRIORITY CLAIMED (Y/N): Y DEMAND RECEIVED (Y/N): Y  
NO BASIC FEE (Y/N): N PRIORITY DATE: 04 / 22 / 94  
ATTORNEY DOCKET NUMBER: HUBR1099PFFM US DESIGNATED ONLY (Y/N): N  
CORRESPONDENCE NAME/ADDRESS: CUSTOMER NUMBER: COUNTRY: EPX  
NAME: MARY ANNE SCHOFIELD TELEPHONE: 2126889200  
FELFE & LYNCH  
STREET: 805 THIRD AVENUE  
CITY: NEW YORK,  
STATE/COUNTRY: NY ZIP: 10022  
APPLICATION TITLES:  
MEDICAL IMPLANTS MADE OF MOULDINGS

TAB TO LAST POSITION, PUSH SEND